

Permit Number _____

Issue Date _____

Fee Paid _____

GBBOH Authorization _____

Great Barrington Board of Health

334 Main Street, Great Barrington, MA 01230

413.528.0680 fax-528.3064

(Revised 3/11/14)

Disposal System Construction Permit

(This permit is not transferable and is good for a maximum of three years.)

Type of Permit: Repair Upgrade New Construction Abandonment

Repairs/Components (\$100) Complete System (\$250.) Design Flow: _____ (Gallons Per Day)

Address of Disposal System Installation _____

Map and Lot Number _____ Owner's Name _____

Applicant's Address _____

Application submitted by _____ Dated _____ Fax # _____

Attached Plan Number _____ By _____ Dated _____

GBBOH Licensed. Installer _____ Fax # _____

Address and Phone Number _____

Variances Granted _____ Date _____

_____ Date _____

House Plans Reviewed Outlet Filter and Riser to Grade Two-Compartment Septic Tank

Conditions of Permit: _____

Installer must phone GBBOH before beginning construction. Any changes to the plans or installation must have the written approval of the designer and the GBBOH. Before covering, all system components must be inspected by the designer and the GBBOH. Within 30 days of completion, the Designer and Installer must submit an as-built sketch with ties to all system components and a letter certifying that the installation was done according to the plans and Title V. If certified fill is used, a current sieve analysis must also be submitted. No person shall discharge sewage to this system without first obtaining a Certificate of Compliance. The applicant, designer and installer should be aware of their obligation to comply with the regulations of the Division of Water Pollution Control pursuant to MGL c.21, s. 43, the Wetlands Protection Act MGL c.131, s.40 and the Bylaws and Regulations of Great Barrington and the Great Barrington Conservation Commission.

The Owner/Applicant is hereby granted permission work on the septic system at the above location as described and mapped in the Disposal System Construction Permit Application. All work is to be done in accordance with GBBOH regulations and Title V of the State Environmental Code Chapter 310 CMR 15.00.

Trench Permit # _____ Approved by the GBBOH _____ Date _____

***Installer to comply with Trench Regulation 520 CMR 14.00 if required. Permit required prior to commencing work.

Disposal System Certificate of Compliance

BOH Inspection Certification _____

Installer's Certification Letter received _____

Engineer's Certification Letter received _____

As-Built Plans received _____ Sieve Analysis _____

Existing components decommissioned (Statement in Certification) _____

Approved by the GBBOH _____ (Health Agent) Date _____

This certificate does not satisfy the requirements of Title V for a Property Transfer unless it is a complete system upgrade, new construction or accompanied by a valid Title V report. This Certificate is good for two years and shall not constitute a statement that the system will function as designed, nor shall it in any way limit the powers or responsibilities of the Board of Health to protect the public health or environment.